

AMENDMENTS TO THE CLAIMS

1. – 22. (CANCELED)

23. **(Currently Amended)** A method ~~of reducing the size of~~ treating a lung of a patient using an intra-bronchial device while controlling biological interaction of the device with the patient, the method including the steps of: providing an intra-bronchial device that comprises a one-way valve, the intra-bronchial device precludes air from being inhaled through an air passageway into a lung portion ~~to be reduced in size~~ when inserted into the air passageway communicating with the portion of the lung; associating a medicant that controls the biological interaction with the intra-bronchial device; and inserting the intra-bronchial device in the air passageway.

24. **(Original)** The method of claim 23, wherein the step of associating the medicant with the intra-bronchial device is performed before the step of implanting the device.

25. **(Original)** The method of claim 23, wherein the step of associating the medicant with the intra-bronchial device includes overlying at least a portion of the intra-bronchial device with the medicant.

26. **(Original)** The method of claim 23, wherein the step of associating the medicant with the intra-bronchial device includes impregnating at least a portion of the intra-bronchial device with the medicant.

27. **(Original)** The method of claim 23, wherein the intra-bronchial device includes an absorptive member, and wherein the step of associating the medicant with the intra-bronchial device includes absorption of the medicant by the absorptive member.

28. **(Original)** The method of claim 23, wherein the medicant is selected from a group consisting of tissue growth inhibitors, tissue growth enhancers, anti-microbial agents, anti-inflammatory agents, and biological reaction inhibitors.

29. **(Original)** The method of claim 23, wherein the medicant is arranged to control biological interaction over a period of time.

30. **(Original)** A method of claim 23, including the further steps of providing a cavity in the intra-bronchial device for receiving the medicant; and associating the medicant with the cavity.

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31. **(Original)** The method of claim 30, wherein the step of associating the medicant with the intra-bronchial device is performed before the step of implanting the device.

32. **(Original)** The method of claim 30, wherein the cavity includes an absorptive member, and wherein the step of associating medicant with the intra-bronchial device includes absorption of the medicant by the absorptive member.

33. **(Original)** The method of claim 30, wherein the medicant is selected from a group consisting of tissue growth inhibitors, tissue growth enhancers, anti-microbial agents, anti-inflammatory agents, and biological reaction inhibitors.

34. **(Original)** The method of claim 30, wherein the medicant is arranged to control biological interaction over a period of time.

35. **(Canceled)**

36. **(Currently Amended)** A method of treating a lung comprising:
providing an implantable obstruction device at a distal end of a delivery catheter, the obstruction device comprising an air impermeable membrane on an outer portion thereof;
associating a medicant with the obstruction device;
guiding the distal end of the catheter to a delivery site in a lung and deploying the obstruction device in an air passageway of the lung so as to preclude air flow in at least one direction through the air passageway; and
removing the catheter from the lung and leaving the implanted obstruction device in place;
wherein the obstruction device comprises a one-way valve and further comprising placing the obstruction device in an air passageway in an orientation that prevents fluid from flowing distal of the device while allowing fluid to travel in a proximal direction past the device.

37. **(Canceled)**

38. **(Previously Presented)** The method of Claim 36, wherein associating a medicant with the obstruction device comprises coating an exterior portion of the membrane with the medicant.

39. **(Previously Presented)** The method of Claim 36, further comprising injecting a medicant into a lung portion distal of the delivery site prior to deploying the obstruction device.

40. **(Currently Amended)** A method of treating a lung comprising:

providing an implantable obstruction device at a distal end of a delivery catheter, the obstruction device comprising an air impermeable membrane on an outer portion thereof;

associating a medicant with the obstruction device;

guiding the distal end of the catheter to a delivery site in a lung and deploying the obstruction device in an air passageway of the lung so as to preclude air flow in at least one direction through the air passageway;

removing the catheter from the lung and leaving the implanted obstruction device in place; and

~~The method of Claim 36, further comprising~~ configuring and deploying the obstruction device so as to maintain a mucociliary pathway between a distal side and a proximal side of the obstruction device.

41. **(Previously Presented)** The method of Claim 36, wherein associating a medicant with the obstruction device comprises placing the medicant in a hollow cavity in the obstruction device.

42. **(Previously Presented)** The method of Claim 36, wherein associating a medicant with the obstruction device comprises absorbing the medicant into an absorbent member carried by the obstruction device.

43. **(Previously Presented)** The method of claim 36, wherein the medicant is at least one member of the group consisting of tissue growth inhibitors, tissue growth enhancers, anti-microbial agents, anti-inflammatory agents, and biological reaction inhibitors.

44. **(New)** The method of Claim 23, further comprising placing the intra-bronchial device in an air passageway in an orientation that substantially prevents fluid from flowing in a distal direction past the intra-bronchial device while allowing fluid to travel in a proximal direction past the intra-bronchial device.

45. **(New)** The method of Claim 23, further comprising configuring and deploying the intra-bronchial device so as to maintain a mucociliary pathway for mucus transport past the intra-bronchial device.